## **Request for Copies of Sealed Matrimonial Records**

	( INDEX #
	(If unknown leave blank)
Information for Request:	
Parties named in Divorce Action:  (First and Last name at time of divorce)	
Year of Divorce (approximate):	
Document(s) Requesting:	
Certified copy – Acts a  Non-certified copy  Contact Information: (Where to mail the copies to)  Name: Address:	s true original with County seal
Phone Number:	
For Notary Use Only	(SIGNATURE) Your signature <u>MUST</u> be notarized